

| CLAIMS ONLY | | | | | | | SERIAL NO. <div style="font-family: cursive; font-size: 1.2em;">C990 4334</div> | FILING DATE |
|--------------------|----------|------|------------------------|------|------------------------|------|--|-------------|
| | | | | | | | APPLICANT(S) | |
| CLAIMS | | | | | | | | |
| | AS FILED | | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | | | |
| | IND. | DEP. | IND. | DEP. | IND. | DEP. | | |
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| TOTAL IND. | 3 | | | | | | | |
| TOTAL DEP. | 27 | | | | | | | |
| TOTAL CLAIMS | 30 | | | | | | | |
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| TOTAL IND. | | | | | | | | |
| TOTAL DEP. | | | | | | | | |
| TOTAL CLAIMS | | | | | | | | |

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM PTO-2022 (1-98)

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